

TwinCar AUTOMOTIVE PTE LTD

Company Registration and GST No. 200714616M

2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub, Singapore 417921

Tel: 67440510

Fax: 67410510

Email: sales@n51.com.sg

Our Ref:

SBQ 8898 K

Your ref:

SMJ 3897 C

24 July 2023

INDIA INTERNATIONAL INSURANCE PTE LTD

BY EMAIL motorclaim@iii.com.sg ONLY

64 CECIL STREET

#04-00 & #05-00 IOB BUILDING

SINGAPORE 049711

Attn: Motor Claims Department

Dear Sir/Madam,

DATE OF ACCIDENT : 23 July 2023

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS

PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by **TEO JULY** to notify you of a road traffic accident on **23 July 2023** at about **02:00 HOURS** along **YISHUN RING RD X YISHUN ST 21 BESIDE BLK 296 YISHUN ST 20** our client's vehicle **SBQ 8898 K & SMJ 3897 C** you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



Twincar Automotive Pte Ltd

VEHICLE NO: SBO 8898 K	MAKE & MODEL: BMW 523	AUTO / MANUAL
DATE OF ACCIDENT:	23 / 07 / 2023	CC: 2.5
TIME OF ACCIDENT:	0200 HRS	
LOCATION OF ACCIDENT:	Yishun Ring Rd x Yishun Street 21 beside Bk 296 Yishun Street 20	
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE	
NAME OF OWNER:	Teo Juiy	
TEL NO:	H/P: 9896 8998	OFFICE: HOME:
NRIC:	S7603431A	
ADDRESS:	Apt Bk 201 Yishun Street 21 #08-61 S 760201	
EMAIL:	JK. POON@ICLOUD.COM	
CLAIM TYPE:	OD / <u>THIRD PARTY</u> / REPORTING ONLY	
FLEET POLICY:	YES <u>NO</u> ?	
INSURANCE COMPANY:	China Taiping	
TYPE OF COVERAGE:	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft	
POLICY NO:	DM PCSNA 00111642302	
NAME OF DRIVER:	AS ABOVE / IF NO: Jeremy Poon Joo Khoo	
NRIC:	S7603431A	ANY PASSENGER: 1 (1M)
DATE OF BIRTH:	04 / 02 / 1976	LICENCE PASSED DATE: 20 / 01 / 2012
OCCUPATION:	OUTDOOR / <u>INDOOR</u>	
GENDER:	<u>MALE</u> / FEMALE	
CONTACT NO:	H/P: 8691 1681	OFFICE: HOME:
ADDRESS:	Apt Bk 201 Yishun Street 21 #08-61 S760201	
EMAIL:		
DOES DRIVER OWNED ANY VEHICLE:	<u>NO</u> / IF YES, REG NO:	INSURER:
RELATIONSHIP:	mother	
WEATHER CONDITION:	<u>CLEAR</u> / RAINING / OTHERS:	
ROAD SURFACE:	<u>DRY</u> / WET / OTHER:	
ANY INJURIES:	NO / IF <u>YES</u> , WHO?	
NAME & CONTACT:	Jeremy Poon Joo Khoo (8691 1681)	
NAME & CONTACT:	Ho Han Hwee (9793 2927)	
POLICE REPORT:	<u>NO</u> / IF YES, WHERE?	
NOTICE OF INTENDED PROSECUTION GIVEN?	<u>NO</u> / IF YES, WHO?	
VEHICLE B REG NO:	SMJ 3897C	ANY PASSENGERS: N/A
NAME OF DRIVER:		CONTACT NO: 8822 0587
VEHICLE C REG NO:		ANY PASSENGERS:
VEHICLE D REG NO:		ANY PASSENGERS:
VEHICLE E REG NO:		ANY PASSENGERS:
VEHICLE F REG NO:		ANY PASSENGERS:
VEHICLE G REG NO:		ANY PASSENGERS:
ANY WITNESS? IF YES, NAME:		WITNESS CONTACT:
WAS THERE ANY VIDEO CAPTURE?	YES / <u>NO</u>	
WAS THERE ANY AUDIO RECORDED?	YES / <u>NO</u>	
ACCIDENT SCENE PHOTOS TAKEN?	<u>YES</u> / NO	
ACCIDENT PORTION:	Rear Left Portion	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?		YES / <u>NO</u>
WORKSHOP PARTICULAR:	Twincar Automotive Pte Ltd	
CONTACT NO:	68420051 / 67440510	
CONTACT PERSON:	Steve 8821 5151	
FAX NO:	67410510	
WORKSHOP EMAIL:	sales@n51.com.sg	


Describe Circumstance of the Accident

As of above date & time, I was driving my vehicle (SBQ 8898 K) along Yishun Ring Rd beside Blk 246 Yishun Street 20 S 760296 on the right lane of a 2 lane rd. Before the junction of Yishun Street 21, my vehicle was stationary while waiting for traffic, out of a sudden, vehicle B (SMJ 3897 C) collided into the rear left portion of my vehicle.

Declaration

I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time


Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all Insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Free

Policyholder's Signature / Date & Time

[Signature]

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

